

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>Tequest</i>	<i>925</i>	<i>02-28-01</i>
RESPONSE FORMALITY REVIEW	<i>Jo</i>	<i>626</i>	<i>06/25/01</i>

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral)... Canceled        A ..... Appeal  
÷ ..... Restricted                    O ..... Objected

Claim		Date	
Final	Original		
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Claim		Date	
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